

Colorado Secretary of State  
Elections Division  
1700 Broadway, Ste. 200  
Denver, CO 80290  
Ph: (303) 894-2200 ext. 6383  
Fax: (303) 869-4861  
Email: cphelp@sos.state.co.us  
www.sos.state.co.us



RECEIVED:

OCT 19 2025

Office of the City Clerk  
City of Castle Pines

REPORT OF CONTRIBUTIONS AND EXPENDITURES  
(1-45-108, C.R.S.)

Full Name of Committee/Person:	Nate Winegar for Castle Pines City Council
As Shown On Registration	
Address of Committee/Person:	6625 Barnstead Drive
City, State & Zip Code:	Castle Pines, CO 80108
Committee Type:	Candidate for Castle Pines City Council
Name and Address of Financial Institution	US Bank, Lagae Road, Castle Pines, CO

SOS ID NUMBER (state and county committees):

Type of Report

- ☒ Regularly Scheduled Filing.
- ☐ Amended Filing. This amends previous report filed on (date)   
Submit changes or new information ONLY
- ☐ Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)
- ☐ Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: 10/1/2025 Through 10/15/2025  
Date Date

Declared Total Spending (if applicable) \$   
[Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 100.00
2	Total Monetary Contributions (line 11)	\$ 80.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 180.00
4	Total Monetary Expenditures (line 19)	\$ 91.18
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 88.82

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.  
[Art. XXVIII Sec. 10(2)(a)]

**Authorization** (Must be completed by either the Registered Agent OR the Candidate): I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.

Print Registered Agent's Name: Susan Zloth

Registered Agent's Signature: Date: 10/16/2025

Print Candidate Name: Nate Winegar

Candidates Signature: Date: 10-17-2025

# **DETAILED SUMMARY**

**Full Name of Committee/Person:** Nate Winegar for Castle Pines City Council

**Current Reporting Period:** 10/1/2025

**Through** 10/15/2025

<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>		\$ 100.00
6	<b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 80.00
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ 0
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 180.00
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ 0
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 180.00
14	<b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 91.18
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ 0
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ 0
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 91.18
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 91.18

**Schedule A – Itemized Contributions Statement (\$20 or more)**

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Nate Winegar for Castle Pines City Council**WARNING: Please read the instruction page for Schedule "A" before completing!**

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/6/2025	4. Name (Last, First): <u>Nate Winegar</u>
2. <u>Contribution Amt.</u> \$ 80.00	5. Address: <u>6625 Barnstead Drive</u>
3. <u>Aggregate Amt. *</u> \$ 80.00	6. City/State/Zip: <u>Castle Pines, CO 80108</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Donation</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>State Of Colorado, Division of Child Welfare</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Permanency Expert</u>

  

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):

  

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):

  

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):

\* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6), Political Party Art. XXVIII, Sec. 3(3), Political Committee Art. XXVIII, Sec. 3(5), Small Donor Committee Art. XXVIII, Sec. 2(14).

**Schedule B – Itemized Expenditures Statement (\$20 or more)**  
[1-45-108(1)(a), C.R.S.]

**Full Name of Committee/Person:** Nate Winegar for Castle Pines City Council

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> 10/6/2025	4. Name: <u>King Soopers</u>
2. <u>Amount</u> \$ 8.92	5. Address: <u>7284 Lagae Rd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Castle Pines, CO 80108</u>
	7. Purpose of Expenditure: <u>Plates/Napkins for meet and greet</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/10/2025	4. Name: <u>Krispy Kreme</u>
2. <u>Amount</u> \$ 53.71	5. Address: <u>7514 Parkway Drive</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lone Tree, CO 80124</u>
	7. Purpose of Expenditure: <u>Donuts for meet and greet</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/10/2025	4. Name: <u>UPS Store</u>
2. <u>Amount</u> \$ 28.55	5. Address: <u>558 E Castle Pines Pkwy</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Castle Pines, CO 80108</u>
	7. Purpose of Expenditure: <u>Printing flyers to hand out at meet and greet</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication